Health education teaching for blinds...
INTRODUCTION

Sexuality is a human dimension which covers gender, sexual orientation and identity, erotism, emotional attachment, love and reproduction. It is experienced and expressed in thoughts, fantasies, desires, beliefs, values, attitudes, practices, roles and relationships. In addition to the agreement that the socio-cultural elements are critical to the conceptualization of human sexuality, there is theoretical convergence that this includes both the issue of human reproductive, as the question of pleasure. So when the couple did not want to conceive, the pleasure to be experienced with the use of a Contraceptive (MAC's).

Couples usually inform you about the MAC’s by a health professional, family, friends, magazines, educational brochures and internet, should choose the most suitable to their needs and personalities, but the final decision should be give with the help of a trained professional. Each individual is unique, so determined the MACs are ideal for some and not for others. Everything will depend on the personal characteristics and the couple's reproductive phase of life, clinical conditions, adaptation and style of each.

Like all citizens, most individuals with disabilities are interested in knowledge about their bodies and their sexual and reproductive health. However, according to common sense, the blind have more questions about this topic; they do not have the same opportunities of the seers. From previous research, it is recognized that the visually impaired difficulties of access to health information, particularly about the anatomy and physiology of sexual and reproductive health and the MACs because it requires a differentiated approach.¹

Disability, according to the concept enunciated by the World Health Organization (WHO) through the International Classification of Functioning, Disability and Health (ICF) is defined as “problems in the function or structure of the body, with a significant deviation or loss”.² Among the various types of deficiencies stand out the mental, the physical and sensory, included in this latest visual impairment.

The difficulties of young people with disabilities in exercising their rights and seek their autonomy through effective social inclusion and participation relate primarily to the fulfillment of the rights of this population, among them the right to sexuality.³

Regarding health education for the blind, especially focused on the MACs, there is a scarcity of literature in Braille and orientation is passed to this audience by professionals not always able to convey it in a comprehensible way. Researchers refer to the informational resources available are limited to sighted people, thus the information is transmitted to the seers not superficially, leaving doubts and questions; therefore, do not meet the needs of blind people.⁴

Given the right of everyone to have access to information and guidance about MACs knowing the difficulties and limitations of the blind, it is relevant to propose specific educational technologies for this target audience. The literature recommends that this should be explored within the remaining senses of the blind - touch and hearing - to contribute to a better understanding of the information.⁵

For the blind can be used as an aid in health education, the Assistive Technology (AT), understood as all the resources and services that contribute to provide or enhance the functional capacity of people with disability and promote independent living and inclusion. Its main objectives are to promote the functionality and participation of people with disabilities, seeking autonomy, accessibility, quality of life and inclusion by virtue of extending the possibilities of independence, information, education, health, among others.⁶ ⁷

Health education is a resource through which scientific knowledge produced in the field of health, brokered by health professionals, comes to people's everyday lives, since understanding the teachings leads to acquisition of new habits and health behaviors.⁵ The nurse, as a health professional, is responsible for the creation of different strategies in their work, in order to promote interaction. Thus, the assistance becomes more dynamic, leading to a better utilization of information.⁹ However, these actions must be preceded by an understanding of reality and the specific requirements of each customer, respecting their culture and limitations.¹⁰ Emphasizing that health professionals should be able to meet all kinds of people always paying humanized care, including blind people.

A study of blind women, it was found that they know little about your body and about the OMC's, highlighting the natural methods.¹ From this study and considering the above regarding the right to sexual and reproductive health of these clients, as well as the shortage of educational resources on its theme, suited
METHOD

Article compiled from Monograph Sexual and reproductive health of women blind: focus on natural contraceptive method. Presented to the Graduate Program in Nursing, Department of Nursing, Federal University of Ceará/UFC. Fortaleza, Brazil. 2010.

This was a descriptive study and intervention. The study used a qualitative approach, characterized by greater concern with the depth and breadth of understanding of the social group under study than with the generalization of theoretical concepts. So no favors numerical criterion, but rather the ability to reflect on all its multiple dimensions and should focus on the social subjects that hold the attributes that the researcher wishes to know. However, the number of participants must be sufficient to allow recurrence of certain information. 11

Was performed at the Laboratory of Health Communication (LabCom_Saúde - in Portuguese) Department of Nursing, Federal University of Ceará, in July 2010. The LabCom_Saúde is an environment that combines equipment and infrastructure approaches to communication and education in public health.

The LabCom_Saúde was created in 2004 after a partnership made between the Department of Nursing of the Federal University of Ceará and the School of Nursing Ribeirão Preto USP funded by CNPq. Aims to develop communication studies related to health care, encompassing different clienteles, and collaborate in training resources for health, especially for Nursing. 12

The subjects were blind women with sexually life, active or not, 18 years old. They were contacted randomly through a database visually impaired organized by People with Disabilities Project: Research of nursing care. The number of participants was limited by the fact that it was blind persons, which need a facilitator.

The educational strategy followed a sequence of four steps pre-planned:

1) The host, accomplished with the use of a music CD for relaxation;

2) Recognition of the female reproductive anatomy, it was delivered and explained for each pair of participants a plank female reproductive tract, containing the internal organs (vaginal canal, uterus, fallopian tubes and ovaries) embossed with paper with high thickness, different textures for these touch and imagine their location in the abdomen. The name of each organ was written in Braille and ink. Work in pairs aimed to stimulate the exchange of ideas and mutual support. These boards were created to assist in health education of the blind. 4;

3) Exposure dialogue conducted by facilitator addressing female sexual organs, physiology of ovulation and fertilization, and natural MAC (basal body temperature, cervical mucus or Billings, table or method Ogino-Knaus and withdrawal);

4) Evaluation and assessment of knowledge acquired, was effected through a set of questions and answers.

The subjects were divided randomly into two groups. A question was directed to the first group, do not know if this would meet the other group and this also did not know the answer facilitator. The game contained 10 questions on the topics studied in the workshop:

1. How many contraceptive methods are there? What are they?
2. What is family planning?
3. As ovulation?
4. What are the disadvantages of the cervical mucus method?
5. What are the advantages of the cervical mucus method?
6. What factors can change the cycle?
7. What is the sympto-thermal method?
8. Explain the method basal body temperature?
9. What are the disadvantages of the rhythm method?
10. Name four female sex organs.
11. What are the natural methods?

To approach all MAC’s materials have been used to facilitate the teaching and understanding of women. In basal temperature was guided using thermometers appropriate to the blind, the cervical mucus method was used egg white to help develop the tactile perception of the consistency of fertile mucus, in the table, for every four participants, was handed a blank menstrual calendar with 30 days of the month, Braille, containing small velcro squares for each day. This calendar has a fixed, made with the rough face of the velcro, and other moving...
parts used to record the menstrual period and the period in which ovulation is likely to occur, and we can predict the fertile period. On withdrawal of verbalization was used to inform the practice of the method.

Their production was filmed and recorded speeches were transcribed and qualitatively analyzed by analysis of content. were created the following categories: << About basal temperature >>, << cervical mucus >>, << withdrawal >>.

The project was approved by the Ethics Committee of the Federal University of Ceará (UFCE), protocol COMEPE No. 123/10. Were ethical principles to guarantee the confidentiality of the identity of the subject, non-maleficence, and the right to leave the study without personal losses. The subjects who agreed to participate signed a consent form in the presence of witnesses’ seer.

RESULTS

The study included eight women aged between 19 and 45 years, four were single, married and divorced three; education ranged from high school to higher incomplete. Only one participant had son. All had total blindness, and five had visual impairment from birth and three became blind in adulthood. The speeches presented to illustrate the results were coded with the letter M (for women) plus the number of order 1-8.

♦ On the basal temperature

Consists in checking body temperature during the fertile period. It is known that during this period the temperature of the female body increases from 0,3 to 0,8°C. The comments that follow depict the perceptions raised by participants regarding the basal temperature method. However, barriers to private clairvoyance were not found, as the need to acquire the thermometer voice or the help of a psychic to make the temperature reading on the thermometer common use.

♦ About the withdrawal

Method in which the man withdraws his penis from the vagina before he ejaculates. Requires learning in self ejaculation. Men consider that this is a way to participate in preventing pregnancy.

Reviews and questions presented during the explanation of the withdrawal were:

This, coitus interruptus is the most risky. (M7)

This is what most people do and do not know it is a natural method. (M4)

I do not think it’s good that it does not. (M1)

that soon after menstruation, there is a period “dry”; then comes the thick mucus, white and brittle that remains until the beginning of the fertile period, when it is replaced by a mucus thin, transparent and elastic.14 The statements below correspond to perceptions raised by participants regarding cervical mucus:

I do not want groping is very dirty. (M8)

Really looks like mucus that we [referring to egg white]. (M1)

Every woman has it? (M4)

It was noted that the manipulation of egg white was rejected by a women. One noted the similarity of the mucus with the egg white and another asked about the presence of mucus in all women.

♦ About the table

In this method the woman should register the first day of each menstruation for 6 to 12 months, checking the length of each cycle, counting from the first day of menstruation until the day before the next menstrual period. This method is recommended only for women who have regular menstrual cycles, ie, the difference between the largest and smallest cycle does not exceed ten days.14

The comments and questions during the explanation of the table, using the plank menstrual calendar were:

I loved the idea, and then I want to learn to make a calendar that. (M2)

Very useful. (M1)

Now it’s easy to understand how the rhythm method. (M4)

I know men who make a table of women. (M7)

I always thought this complicated rhythm method, but now I understand better. (M4)

It was observed that the experience with the board calendar was positive for women, who showed enthusiasm and interest in learning to use the table. Indicated that this material was very useful, claiming to be easier to understand how the rhythm method after that moment.

♦ About the cervical mucus

The woman attempts to understand vaginal lubrication caused by fertile mucus, realizing...
It was noticed that some of the women had knowledge about this method, and did not know it was a natural method. Another referred to as a risky method and colleague said he did not like him.

**DISCUSSION**

Some people believe that women with disabilities are asexual, being seen so childish, to be protected and cared for. A woman with poor eyesight is, first of all, a woman who has the possibility to exercise their sexuality, and can choose whether to have children or not. From previous studies, it was concluded that blind women dating, married, have children, work, finally, fully exert their womanhood, they understand and live their sexuality and sensuality without prejudice.

The eligibility criteria for the use of MAC's for people who have specific medical conditions involving the provision of contraceptives to persons with disabilities and requires additional considerations. Individuals with visual disabilities represent such a group. Decisions about appropriate contraception should take into account the nature of the disability, the wishes of the person and the nature of the method. Decisions should be based on informed choice.

Materials and methods adapted for the disabled, as well as concepts of special education should be included in health education offered in health services.

To teach about MAC's natural for blind women was possible to create an educational strategy that promotes self-observation and the use of thermometer voice, planks and egg white to simulate the palpation of mucus.

Women should be encouraged to realize the transformations happened in your body for life, but are perceived bias by women touching their own body in order to meet him. Believe that is indecent, affects the moral and good customs, thinking it is a sin. Thus the woman does not learn to like yourself, are you looking to discover and to accept.

It is necessary to stimulate women visually impaired to explore your own body through touch. Cultural issues may explain the lack of intimacy for women with your body. The poor woman is treated as a human being unable to perform his sexuality.

Before the basal temperature method, a blind woman verbalized difficulty in performing it, as you need the thermometer reading. Said one of blind, jokingly, that could seek help from the neighbor. Another suggested, rightly, get a unit with digital readout that tells the temperature by voice.

The literature states that the visually impaired woman is at a disadvantage in using this method. This method is characterized by basal temperature changes that occur in a woman's body during the menstrual cycle. The daily measurement of basal body temperature allows the determination of the infertile period. It is understood by basal body temperature the temperature of the body at rest.

In table method was perceived women's satisfaction in using the calendar to the board understanding of it, because as previously stated, the use of touch facilitates understanding by the blind. The literature highlights that the user of the method of the table should be alert to the fact that each woman has a menstrual pattern itself and the calculations must be individualized, so the table a woman is not for another. The same should give particular attention to factors that may alter the menstrual cycle (illness, stress, depression, changes in work rate, among others).

Use the table to prevent pregnancy in women who are blind must be accompanied by professional and it should direct it to abstain from sex with genital contact in the fertile period.

During the description of the mucus method a woman showed disgust at the thought of touching the egg white that had the appearance of mucus in the female fertile period. From this attitude, even respecting it, I explained the importance of touch, as was previously mentioned.

As regards the method of withdrawal was not considered by women as being safe and effective in relation to prevention of pregnancy. One of the stated dislike blind to realize it.

By interrupting intercourse at the time of ejaculation, some couples who have ejaculation as the end point of intercourse tend to dislike this method, stating that the relationship is incomplete. If the couple is not in tune and both agreed, this practice can bring disagreements to the relationship.

On the belief of withdrawal is not effective, study in order to verify the presence of sperm in pre-ejaculatory fluid, pre-ejaculatory samples examined five patients with premature ejaculation, ejaculatory excessive liquid with three and four healthy volunteers, normal. None of the samples contained sperm, what the authors conclude that, consequently, cannot be responsible for pregnancies, the use of coitus interruptus.
It is perceived that nursing plays a role on these women, which is characterized by a health education on family planning in order to assist them in performing adequate sexual and reproductive health. Thus, this population can elect a method from the guidelines, which health professionals provide. Sexuality is contemplated from individual experiences, values, beliefs, myths and prejudices, built during the socialization of each. It is inseparable from the life of the human being. The professional must be aware of these features, since the methods should be tailored to the user's condition and up to the professional respect these individuals.

The discussion of natural methods happened in a participatory manner, through dialogue, in which women expressed their doubts, anxieties and learning new subjects that were not included in their daily lives. The idea to present this theme in a workshop educational materials using tactile and scientific expertise have made teaching more attractive and profitable.

Enter new information to a group of educators requires a different way of teaching, leading to participation, open dialogue and sincere, using specific teaching methods and suitable for every type of customer, favoring the teaching-learning process with the desired population. From studies it was concluded that sexuality.

The workshop method chosen to conduct health education, was satisfactory, since this mode is done in groups, becoming more dynamic and stimulating to share knowledge, opinions, exchange ideas and experiences.

The use of boards embossed with sizes closer to reality favored exploring the material and to associate with the content transmitted in the explanations of the facilitator, and promotes understanding of the content. The tactile exploration of the materials used to explain the methods table and mucus helped to make concrete information.

The educational strategy used was able to attend the need of the blind subject matter. Used the main directions of the blind that are touch and hearing, exploring them so that they understand the content. We conclude that health education will help some women held in contraception and other be favorable to achieve conception.

Insufficient materials and resources that facilitate learning of the blind. The transmission on MAC's natural issue is rare, especially for this population. The dissemination of this information is needed so that people can choose the MAC's that best suits their lifestyle, your goals and your body. Need to develop materials that are accessible to the blind on sexual and reproductive health.

The authors acknowledge the limitations of this study include a small number of subjects and a single reality. But be alert to the problem that requires further investigation and especially solutions. Expected to sensitize health professionals to inclusive actions accompanied by appropriate training. This is the responsibility of the government and of each professional aiming at conscious and effective contraceptive method for blind person.

Such materials used as well as the educational strategy can serve to support health professionals and educators in special schools who need to teach the blind about sexuality. The family must also be guided to understand that these people also have sexual practice equal to the entire population. The aim is for the blind to feel included in society.

CONCLUSION

The workshop method chosen to conduct health education was satisfactory, since this mode is done in groups, becoming more dynamic and stimulating to share knowledge, opinions, exchange ideas and experiences.

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